



INSTRUCTIONS FOR COMPLETING THE 2015 EMS WEEK YEARS OF SERVICE CERTIFICATE FORM

1. Please ensure that all names are spelled correctly, the level of licensure is correct and the number of years of service is correct and are included for each entry (five year increments only – five, ten, fifteen, twenty, twenty-five years, etc).
2. Use only the “2015 EMS Week years of service certificate table” (submissions using any other format will be returned).
3. Do not hand-write your submissions.
4. The table must be submitted in **word form** only by e-mail **as an attachment**.
5. Faxes and scanned copies (PDF) will not be accepted and will be returned.
6. Do not type in all caps.
7. The table has two examples.
 - a. The first example (in green) is correct .The NAME column must be in First Name / Last Name format. License level must be spelled out as shown below.
 - b. The second example (in red) is incorrect. Do not include the words “Emergency Medical Technician or EMT”. The years of service must be in FIVE year increments.
8. Please e-mail completed forms by **Friday April 3, 2015** to: Paula Atteberry at Paula.Atteberry@illinois.gov.

**All information on the certificate will be printed as it is submitted.
It will not be altered in any way.**

**Type on the form the License Levels
in the manner shown below:**

Basic
Intermediate
Paramedic
Emergency Communications Registered Nurse
Trauma Nurse Specialist

Emergency Medical Dispatcher
First Responder
First Responder Defibrillator
Lead Instructor
Pre-Hospital Registered Nurse